

Fill in this information to identify your case:

Debtor 1	Brenda Gilbert		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			
Case number (if known)	20-20419		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets
		Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 210,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 31,520.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 241,520.00

Part 2: Summarize Your Liabilities

		Your liabilities
		Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 305,618.28
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 25,539.21
		Your total liabilities
		\$ 331,157.49

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 5,406.84
5.	Schedule J: Your Expenses (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 4,818.54

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 3,312.27

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>0.00</u>

Fill in this information to identify your case:

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	First Name	Middle Name	Last Name
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United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			
Case number (if known)	20-20419		

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Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	AFFIRM, INC. Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 720 SAN FRANCISCO, CA 94104 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number A2WZ \$174.00 When was the debt incurred? Opened 09/19 Last Active 7/09/20 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Unsecured

Debtor 1 Brenda Gilbert

4.2

AFFIRM, INC.

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 720

SAN FRANCISCO, CA 94104

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number

ZYMW

\$0.00

When was the debt incurred? Opened 08/19 Last Active 5/29/20

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Unsecured

4.3

AFFIRM, INC.

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 720

SAN FRANCISCO, CA 94104

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number

R7S6

\$0.00

When was the debt incurred? Opened 12/19 Last Active 5/06/20

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Unsecured

4.4

AFFIRM, INC.

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 720

SAN FRANCISCO, CA 94104

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number

50DX

\$0.00

When was the debt incurred? Opened 12/19 Last Active 5/06/20

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Unsecured

Debtor 1 Brenda GilbertCase number (if known) 20-20419**4.5**AFFIRM, INC.

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 720

SAN FRANCISCO, CA 94104

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account numberQV28

\$0.00

When was the debt incurred? Opened 12/19 Last Active 12/19**As of the date you file, the claim is:** Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Unsecured

4.6AFFIRM, INC.

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 720

SAN FRANCISCO, CA 94104

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account numberSY73

\$0.00

When was the debt incurred? Opened 11/18 Last Active 11/07/19**As of the date you file, the claim is:** Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Unsecured

4.7AFFIRM, INC.

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 720

SAN FRANCISCO, CA 94104

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account numberVRJX

\$0.00

When was the debt incurred? Opened 12/18 Last Active 1/03/19**As of the date you file, the claim is:** Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Unsecured

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4.8	BAYVIEW FINANCIAL LOAN Nonpriority Creditor's Name ATTN: BANKRUPTCY DEPT 4425 PONCE DE LEON BLVD. 5TH FLOOR <u>CORAL GABLES, FL 33146</u> Number Street City State Zip Code	Last 4 digits of account number <u>1557</u>	\$0.00
	When was the debt incurred? <u>Opened 06/06 Last Active 09/19</u>		
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input checked="" type="checkbox"/> Other. Specify <u>Real Estate Mortgage</u>		
4.9	CAPITAL ONE Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 30285 <u>SALT LAKE CITY, UT 84130</u> Number Street City State Zip Code	Last 4 digits of account number <u>0544</u>	\$0.00
	When was the debt incurred? <u>Opened 11/18 Last Active 5/05/20</u>		
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
4.1 0	CITIFINANCIAL Nonpriority Creditor's Name ATTN: BANKRUPTCY 605 MUNN ROAD <u>FORT MILL, SC 29715</u> Number Street City State Zip Code	Last 4 digits of account number <u>7799</u>	\$0.00
	When was the debt incurred? <u>Opened 06/06 Last Active 07/13</u>		
	As of the date you file, the claim is: Check all that apply		
	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input checked="" type="checkbox"/> Other. Specify <u>Real Estate Mortgage</u>		

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4.1 1	<p>COMENITYBANK/NEW YORK Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u></p>	<p>Last 4 digits of account number 3932</p> <p>When was the debt incurred? Opened 09/19 Last Active 3/22/20</p>	\$0.00
4.1 2	<p>CREDIT ONE BANK Nonpriority Creditor's Name ATTN: BANKRUPTCY DEPARTMENT PO BOX 98873 LAS VEGAS, NV 89193</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>	<p>Last 4 digits of account number 2520</p> <p>When was the debt incurred? Opened 05/19 Last Active 8/23/20</p>	\$9.00
4.1 3	<p>DEPT OF EDU/NELNET Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 82561 LINCOLN, NE 68501</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify <u>Educational</u></p>	<p>Last 4 digits of account number 9499</p> <p>When was the debt incurred? Opened 03/03 Last Active 10/18</p>	\$0.00

Debtor 1 Brenda Gilbert

Case number (if known)

20-20419

4.1
4

DEPT OF EDU/NELNET

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 82561

LINCOLN, NE 68501

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number

9399

\$0.00

When was the debt incurred?

Opened 11/01 Last

Active 10/18

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Educational

4.1
5

DEPT OF EDU/NELNET

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 82561

LINCOLN, NE 68501

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number

9599

\$0.00

When was the debt incurred?

Opened 04/03 Last

Active 10/18

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Educational

4.1
6

DEPT OF EDU/NELNET

Nonpriority Creditor's Name

ATTN: BANKRUPTCY

PO BOX 82561

LINCOLN, NE 68501

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Last 4 digits of account number

9699

\$0.00

When was the debt incurred?

Opened 10/03 Last

Active 10/18

As of the date you file, the claim is: Check all that apply

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify _____

Educational

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4.1 7 DEPT OF EDU/NELNET Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 82561 LINCOLN, NE 68501 Number Street City State Zip Code	Last 4 digits of account number <u>9799</u> \$0.00 When was the debt incurred? <u>Opened 10/03 Last Active 10/18</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <u>Educational</u>
4.1 8 GENESIS BANKCARD SERVICES Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 4477 BEAVERTON, OR 97076 Number Street City State Zip Code	Last 4 digits of account number <u>9574</u> \$55.00 When was the debt incurred? <u>Opened 10/19 Last Active 8/04/20</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>
4.1 9 HIGHER EDUCATION STUDENT ASSISTANCE AUTH Nonpriority Creditor's Name HESAA SERVICING/ATTN: BANKRUPTCY PO BOX 548 TRENTON, NJ 08625 Number Street City State Zip Code	Last 4 digits of account number <u>4140</u> \$0.00 When was the debt incurred? <u>Last Active 12/15</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <u>Government Unsecured Guarantee Loan</u>

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4.2 0	<p>HIGHER EDUCATION STUDENT ASSISTANCE AUTH</p> <p>Nonpriority Creditor's Name HESAA SERVICING/ATTN: BANKRUPTCY PO BOX 548 TRENTON, NJ 08625</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5659</u> \$0.00</p> <p>When was the debt incurred? <u>Last Active 12/15</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p> <p style="text-align: right;">Government Unsecured Guarantee Loan</p>
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4.2 1	<p>HIGHER EDUCATION STUDENT ASSISTANCE AUTH</p> <p>Nonpriority Creditor's Name HESAA SERVICING/ATTN: BANKRUPTCY PO BOX 548 TRENTON, NJ 08625</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0191</u> \$0.00</p> <p>When was the debt incurred? <u>Last Active 12/15</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify _____</p> <p style="text-align: right;">Government Unsecured Guarantee Loan</p>
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Debtor 1 Brenda GilbertCase number (if known) 20-20419

4.2 2	<p>HIGHER EDUCATION STUDENT ASSISTANCE AUTH Nonpriority Creditor's Name HESAA SERVICING/ATTN: BANKRUPTCY PO BOX 548 TRENTON, NJ 08625</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5668</u> \$0.00</p> <p>When was the debt incurred? <u>Last Active 12/15</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify <u>Government Unsecured Guarantee Loan</u></p>
4.2 3	<p>HIGHER EDUCATION STUDENT ASSISTANCE AUTH Nonpriority Creditor's Name HESAA SERVICING/ATTN: BANKRUPTCY PO BOX 548 TRENTON, NJ 08625</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0925</u> \$0.00</p> <p>When was the debt incurred? <u>Last Active 12/15</u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Other. Specify <u>Government Unsecured Guarantee Loan</u></p>
4.2 4	<p>Internal Revenue Service Nonpriority Creditor's Name PO Box 7346 Philadelphia, PA 19101</p> <p>Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u></u> \$8,789.18</p> <p>When was the debt incurred? <u></u></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>2016 Taxes</u></p>

Debtor 1 Brenda GilbertCase number (if known) 20-204194.2
5NELNET

Nonpriority Creditor's Name

ATTN: BANKRUPTCY CLAIMS
PO BOX 82505
LINCOLN, NE 68501

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number

7799

\$0.00

When was the debt incurred? Opened 11/03 Last Active 01/16

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
- Type of NONPRIORITY unsecured claim:
- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.2
6NELNET

Nonpriority Creditor's Name

ATTN: BANKRUPTCY CLAIMS
PO BOX 82505
LINCOLN, NE 68501

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number

7899

\$0.00

When was the debt incurred? Opened 04/03 Last Active 01/16

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
- Type of NONPRIORITY unsecured claim:
- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

4.2
7NELNET

Nonpriority Creditor's Name

ATTN: BANKRUPTCY CLAIMS
PO BOX 82505
LINCOLN, NE 68501

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number

7699

\$0.00

When was the debt incurred? Opened 04/03 Last Active 01/16

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed
- Type of NONPRIORITY unsecured claim:
- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify _____

Debtor 1 Brenda Gilbert

Case number (if known)

20-20419

4.2 8 Redi Diagnostics Corp. Nonpriority Creditor's Name One Broadway, Suite 102 Elmwood Park, NJ Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 6420 \$ 4,655.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Bill</u>
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4.2 9 SALUTE CARDS Nonpriority Creditor's Name ATTN: BANKRUPTCY PO BOX 105555 ATLANTA, GA 30348 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 5490 \$ 0.00 When was the debt incurred? Opened 09/07 Last Active 09/09 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
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4.3 0 SYNCB/DUMP Nonpriority Creditor's Name C/O PO BOX 965036 ORLANDO, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 7969 \$ 0.00 When was the debt incurred? Opened 08/20 Last Active 08/20 As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u>
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Debtor 1 Brenda GilbertCase number (if known) 20-204194.3
1

SYNCB/HHGREG

Nonpriority Creditor's Name
ATTN: BANKRUPTCY
PO BOX 965060
ORLANDO, FL 32896

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Last 4 digits of account number

7535

\$998.00

When was the debt incurred?

Opened 10/19 Last Active 8/04/20

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Charge Account

4.3
2x

Nonpriority Creditor's Name

Last 4 digits of account number

\$10,859.03

Number Street City State Zip Code
Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
		6a.	\$ <u>0.00</u>
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <u>0.00</u>
Total claims from Part 2	6f. Student loans	6f.	\$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>

Debtor 1 Brenda Gilbert

Case number (if known) 20-20419

6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ 25,539.21

6j. **Total Nonpriority.** Add lines 6f through 6i.

6j. \$ 25,539.21

Fill in this information to identify your case:

Debtor 1	Brenda Gilbert	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number (if known)	20-20419			

Check if this is an amended filing

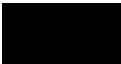
Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Brenda Gilbert

Brenda Gilbert
Signature of Debtor 1

Date February 1, 2024

X

Signature of Debtor 2

Date _____